



# DENTAL

## TRICARE<sup>®</sup> Dental Program Benefit Booklet Supplement

*These pages contain updated information and expanded details about your benefit under the TRICARE Dental Program. Keep these pages with your TRICARE Dental Program Benefit Booklet for future reference.*



## Using the TRICARE Dental Program

### Network Providers

When using a network provider, you should never pay more than the applicable cost-share for covered services subject to applicable maximums, limitations, exclusions, and/or alternate benefits.

### Exclusions

Certain dental procedures (*when performed on a TRICARE Dental Program [TDP] patient*) are not covered by the TDP and may be specifically excluded from TDP coverage. In these cases, prior authorization is required before a dentist performs the dental procedure(s). Procedure examples include cosmetic dental services, adult orthodontics for a person over age 23, medical

procedures, and/or alternate benefits (*when based on patient preference*). This includes if the care delivered exceeded the benefit frequency limitation. For example, if a beneficiary receives three cleaning within a 12-month period and the benefit allows for coverage of two within a 12-month period, the beneficiary is responsible for the cost of the third prophylaxis, regardless of whether or not the beneficiary was notified that the care would exceed the frequency limitation.

### Non-Covered Services

Treatment rendered by a dentist or physician who is a close relative, including spouse, child, adopted child, step-relative, sibling, parent, or grandparent of the beneficiary, will be declined as a non-covered benefit under the TDP.

## Changes to Codes on Dental Procedures and Nomenclature (CDT)

Below are revisions to existing CDT codes listed in your TDP booklet:

- Diagnostic services described by codes D0210, D0220, D0230, D0240, D0250, D0260, D0270, D0272, D0273, D0274, D0290, D0330, and D0340 all describe coverage of radiographic images, not films.
- Preventive services codes D1203 and D1204 for topical application of fluoride in children and adults, respectively, have been removed. Preventive services code D1206 now describes topical application of fluoride varnish. New preventive services code D1208 for topical application of fluoride has been added.
- Restorative service code D2980 R now describes crown repair necessitated by restorative material failure.
- New restorative services codes have been added: D2982 R—onlay repair necessitated by restorative material failure; D2983 R—veneer repair necessitated by restorative material failure; and D2990—resin infiltration of incipient smooth surface lesions.
- Periodontal service code D4271 C—free soft-tissue graft procedure (*including donor site surgery*) has been removed. Periodontal service codes that have been added are: A free soft-tissue graft (D4277) procedure (*including donor site surgery*), first tooth or edentulous tooth position in same graft site and a connective tissue graft (D4273) site will be processed as a one-site benefit when the graft(s) area includes two contiguous teeth. D4278 C—free soft-tissue graft procedure (*including donor site surgery*), each additional contiguous tooth or edentulous tooth position in same graft site.
- The following prosthodontic fixed service codes have been removed: D6970 X—post and core in addition to fixed partial dental retainer, indirectly fabricated; D6972 X—prefabricated post and core in addition to fixed partial dental retainer; and D6973 X—core buildup for retainer including pins.
- Prosthodontic fixed service code D6980 R has been amended to describe fixed partial denture repair necessitated by restorative material failure.
- Implant services code D6056 X now describes prefabricated abutment; includes modification and placement.
- Implant services code D6057 X now describes custom fabricated abutment; includes placement.
- Addition of four new implant services codes: D6101 X—debridement of a peri-implant defect and surface cleaning of exposed implant surfaces, including flap entry and closure; D6102 X—debridement and osseous contouring of a peri-implant defect, includes surface cleaning of exposed implant surfaces and flap entry and closure; D6103 X—bone graft for repair of peri-implant defect, not including flap entry and closure or, when indicated, placement of a barrier membrane or biologic materials to aid in osseous regeneration; and D6104 X—bone graft at time of implant placement.
- Under fixed prosthodontics, remove service of additional posts (D6976, D6977) integral to the associated restorative procedure.

## Space Maintainers

Space maintainers are now fully covered without cost-shares for patients until reaching age 19.

## Prosthodontics

Additional posts (D6976, D6977) that are considered integral to the associated restorative procedure have been removed from the list of benefits and limitations.

## TRICARE Dental Program OCONUS

### OCONUS Dentists

TRICARE OCONUS Preferred Dentists (TOPDs) have agreed not to require you to pay their full charge at time of service, only your applicable cost-share, if any; that

they will complete and submit your claims to MetLife; and that payment will be made directly to TOPDs unless you submit a receipt for services rendered, in which case, payment will be made to you.

### OCONUS Claims

When filing OCONUS claims, note that if a service or procedure is considered part of another procedure, the fees will be combined and considered under the most comprehensive procedure. For example, if local anesthesia and an extraction are submitted on the claim, the fee for the local anesthesia will be added to the fee for the extraction.

## MetLife and Other Dental Insurance

Below are some scenarios that describe fees and payment amounts for beneficiaries who use MetLife and another primary insurance provider (*MetLife is the secondary payer*).

To properly determine benefits payable by MetLife as the secondary payer, any claims submitted to MetLife must also include an explanation of benefits statement from the primary insurance provider, which shows the dentist's fee allowance and the amount that the primary insurer paid.

Service	Dentist Original Fee Charged <sup>1</sup>	MetLife Network Fee	Primary Insurer's Network Fee	Primary Insurance Payment Amount	MetLife Payment Amount	Your Payment Due
<b>Scenario 1:</b> The dentist is not a network provider within the primary insurer's network or MetLife's network. MetLife is responsible for remaining costs toward the dentist's original fee charged.						
Crown (50% cost-share)	\$900	N/A	N/A	\$450	\$450	\$0
<b>Scenario 2:</b> The dentist is not a network provider under the primary insurer, but is a MetLife network provider. MetLife is responsible for remaining costs toward the MetLife network fee.						
Crown (50% cost-share)	\$900	\$800	N/A	\$400	\$400	\$0
<b>Scenario 3:</b> The dentist is a network provider under the primary insurer, but is not a MetLife network provider. MetLife is responsible for remaining costs toward the primary insurer's network fee.						
Crown (50% cost-share)	\$900	N/A	\$800	\$400	\$400	\$0
<b>Scenario 4:</b> The dentist is a network provider within the primary insurer's network and the MetLife network. MetLife is responsible for remaining costs toward the highest network fee, whether it's the primary insurer's fee or MetLife's fee.						
Crown (50% cost-share)	\$900	\$800	\$700	\$400	\$400	\$0

1. "Dentist Original Fee Charged" refers to the amount the dentist charges for a service. Please note that when a dentist is a network provider with the primary insurer or MetLife (secondary insurer), the dentist may be contractually obligated to limit charges to either the primary or secondary insurer carrier's network fee. The examples above assume that the "Dentist Original Fee Charged" is an average fee for a given service.

## Directory of Resources

### Online

Visit [www.tricare.mil/dental](http://www.tricare.mil/dental) or

<https://mybenefits.metlife.com/tricare>.

Find MetLife TDP on Facebook at [www.facebook.com](http://www.facebook.com).

### CONUS

#### Claim Submissions

MetLife TRICARE Dental Program

P.O. Box 14181

Lexington, KY 40512

Fax: 1-855-763-1333

#### Customer Service

1-855-MET-TDPI (1-855-638-8371) (toll-free)

Sunday 6:00 p.m.—Friday 10:00 p.m. (EST), except holidays

MetLife TDD/TTY service for the hearing impaired:

1-855-MET-TDP3 (1-855-638-8373) (toll-free)

### OCONUS

#### Claim Submissions

MetLife TRICARE Dental Program

P.O. Box 14182

Lexington, KY 40512

Fax: 1-855-763-1334

E-mail: [OCONUSdentalclaims@metlife.com](mailto:OCONUSdentalclaims@metlife.com)

#### Customer Service

1-855-MET-TDP2 (1-855-638-8372) (toll-free)

Representatives are available to assist beneficiaries in English, German, Italian, Japanese, Korean, and Spanish, Sunday 6:00 p.m.—Friday 10:00 p.m. (EST), except holidays

MetLife TDD/TTY service for the hearing impaired:

1-855-MET-TDP3 (1-855-638-8373) (toll-free)

### Quality of Care

#### Inquiries

MetLife

TRICARE Dental Program

Quality of Care—Grievances

P.O. Box 14184

Lexington, KY 40512

Fax: 1-855-763-1336

### Enrollment and Billing Services

#### Enrollment and Billing Forms, Correspondence

MetLife TRICARE Dental Program

Enrollment and Billing Services

P.O. Box 14185

Lexington, KY 40512

CONUS: 1-855-MET-TDPI (1-855-638-8371) (toll-free)

OCONUS: 1-855-MET-TDP2 (1-855-638-8372) (toll-free)

MetLife TDD/TTY service for the hearing impaired:

1-855-MET-TDP3 (1-855-638-8373) (toll-free)

#### Billing Payments

MetLife

P.O. Box 13740

Philadelphia, PA 19101

### Fraud and Abuse Issues

#### Inquiries

MetLife

Special Investigations Unit—TRICARE

5950 Airport Road

Oriskany, NY 13424

#### Fraud Hotline

1-800-462-6565 (toll-free)

### Other TRICARE-Related Listings

#### Defense Manpower Data Center Support Office

Defense Manpower Data Center Support Office

400 Gigling Road

Seaside, CA 93955-6771

Verify Eligibility: 1-800-538-9552

#### Dental Provider Listings

Visit <https://mybenefits.metlife.com/tricare>

or contact customer service.

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### An Important Note About TRICARE Dental Program Changes

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. For the most recent information, contact your TRICARE Dental Program contractor. More information regarding TRICARE, including the Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices, can be found online at [www.tricare.mil](http://www.tricare.mil).

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